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Application Number	10/532,703
Filing Date	January 15, 2007
First Named Inventor	Karen J. Givous et al.
Title	THERAPEUTIC COMPOSITIONS
Art Unit	1615
Examiner Name	Unknown
Attorney Docket Number	01435.063US1

I hereby revoke all previous powers of attorney given in the above-identified application.

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☒ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/06) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Christopher G. Izzo</i>	Date	2-9-09
Name	Christopher G. Izzo	Telephone	7320 932-0115 x 3028
Title and Company	Associate Director/ Intellectual Property		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 1 forms are submitted.

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